



Healthy Teens. Successful Futures.

The DASH Strategic Plan 2016-2020

Indicators Baseline Report
May 2016

National Center for HIV, Viral Hepatitis, STD, and TB Prevention
Division of Adolescent and School Health



Background

- Indicators were selected from variables collected in existing data systems:
 - ❑ School Health Profiles
 - ❑ National Youth Risk Behavior Survey (YRBS)
 - ❑ State Youth Risk Behavior Surveys
 - ❑ DASH Administrative data
- Indicators were selected to represent key aspects of each strategic imperative and associated objective
- Additional data are available to explore the details and complexity of each issue
- Baseline data are provided from the 2014 School Health Profiles and 2013 YRBS. Updated indicators will be provided annually.
 - ❑ School Health Profiles in odd-numbered years
 - ❑ National and State YRBS in even-numbered years

Report Format

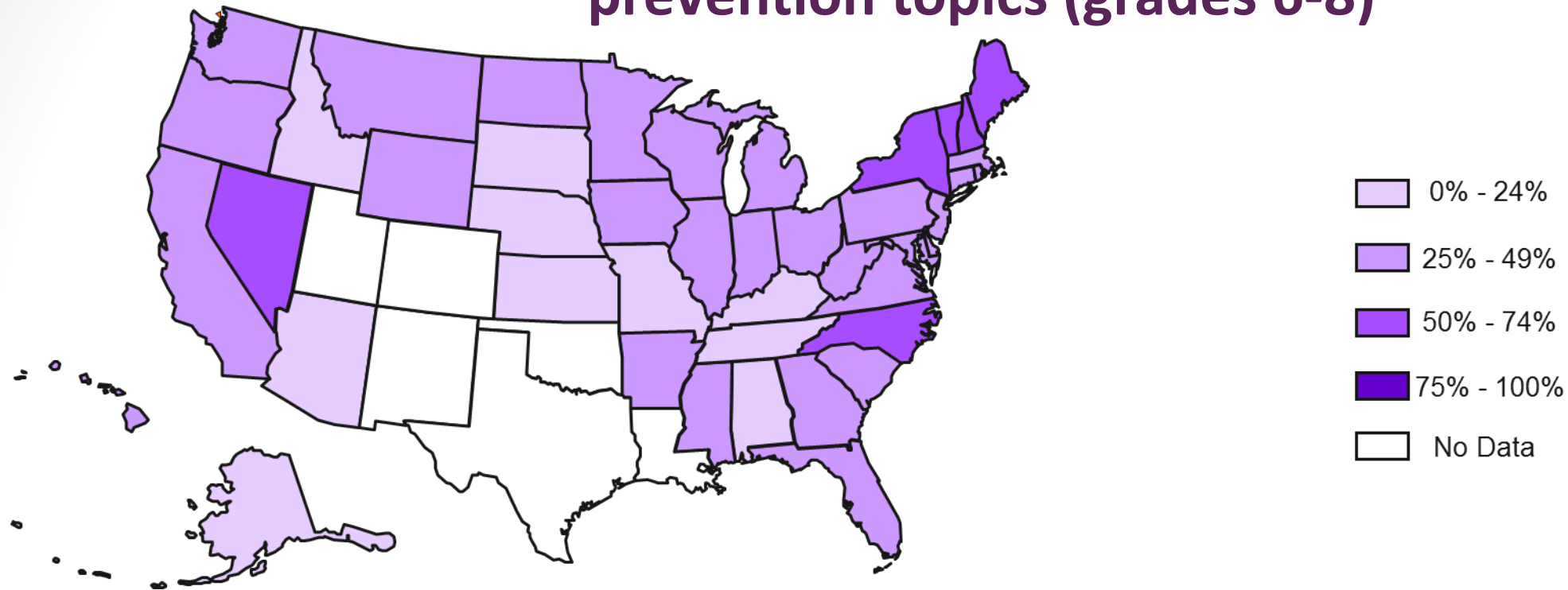
- 2014 School Health Profiles
 - ❑ State maps, shaded by fixed quartiles (0-24%, 25-49%, 50-74%, 75-100%)
 - ❑ Values for median, range, and target provided in notes section
 - ❑ Details regarding construction of the variable provided in notes section as needed
- 2013 National Youth Risk Behavior Survey (YRBS)
 - ❑ Series trend graph
 - ❑ Latest prevalence value and target provided in notes section
 - ❑ Details regarding construction of the variable provided in notes section as needed
- 2013 State YRBSs
 - ❑ State maps, shaded by variable quartiles (e.g., range defines quartiles)
 - ❑ Values for median, range, and target provided in notes section
 - ❑ Details regarding construction of the variable provided in notes section as needed

Strategic Imperative: Take Sexual Health Education to Scale

Objective:

Increase the proportion of schools that offer sexual health education

Percent of middle schools that taught 7 key HIV, STD, and pregnancy prevention topics (grades 6-8)



2014 Median: 34.6%; Range: 8% to 69%

- 0% – 24%: Alabama, Alaska, Arizona, Idaho, Kansas, Kentucky, Missouri, Nebraska, South Dakota, Tennessee
- 25% – 49%: Arkansas, California, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Montana, New Jersey, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, Virginia, Washington, West Virginia, Wisconsin, Wyoming
- 50% – 74%: Maine, Nevada, New Hampshire, New York, North Carolina, Vermont
- 75% - 100%: None

No Data

- Did not have weighted results: Colorado, Louisiana, New Mexico, Oklahoma, Texas
- Did not ask question: Utah

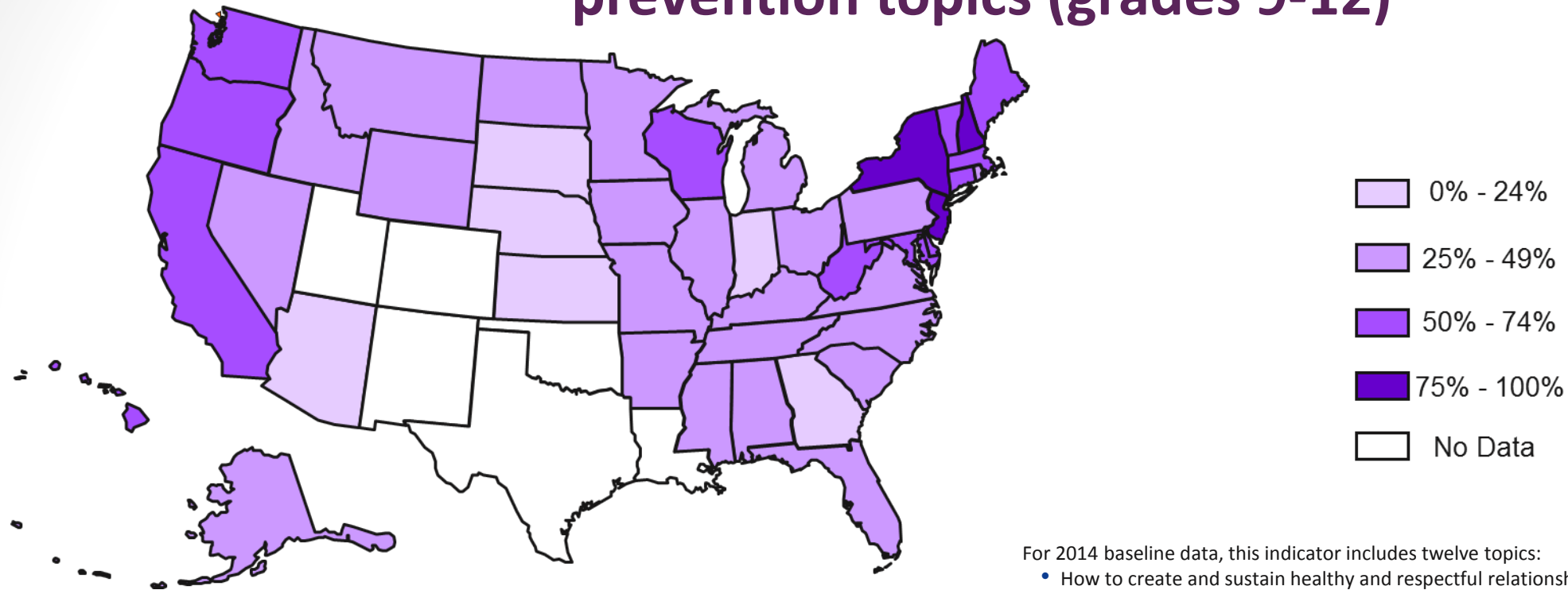
2020 Target: 38.0% – this represents a 10% relative change over baseline.

The indicator is constructed from among School Health Profiles questions posed to lead health education teachers in surveyed schools regarding topics included in teaching about human sexuality, HIV/STD prevention, and pregnancy prevention. For 2014 baseline data, this indicator includes seven topics:

- How HIV and other STDs are transmitted
- Health consequences of HIV, other STDs and pregnancy
- The benefits of being sexually abstinent
- How to create and sustain healthy and respectful relationships
- The influences of family, peers, media, technology, and other factors on sexual risk behaviors
- Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy
- The importance of using condoms consistently and correctly

School Health Profiles, 2014

Percent of high schools that taught 12 key HIV, STD, and pregnancy prevention topics (grades 9-12)



2014 Median: 40.2%; Range: 13% to 90%

- 0% – 24%: Arizona, Georgia, Indiana, Kansas, Nebraska, South Dakota
- 25% – 49%: Alabama, Alaska, Arkansas, Florida, Idaho, Illinois, Iowa, Kentucky, Michigan, Minnesota, Mississippi, Missouri, Montana, Nevada, North Carolina, North Dakota, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Virginia, Wyoming
- 50% – 74%: California, Connecticut, Delaware, Hawaii, Maine, Maryland, Massachusetts, Oregon, Vermont, Washington, West Virginia, Wisconsin
- 75% – 100%: New Hampshire, New Jersey, New York

No Data

- Did not have weighted results: Colorado, Louisiana, New Mexico, Oklahoma, Texas
- Did not ask question: Utah

2020 Target: 44.2% – this represents a 10% relative change over baseline

For 2014 baseline data, this indicator includes twelve topics:

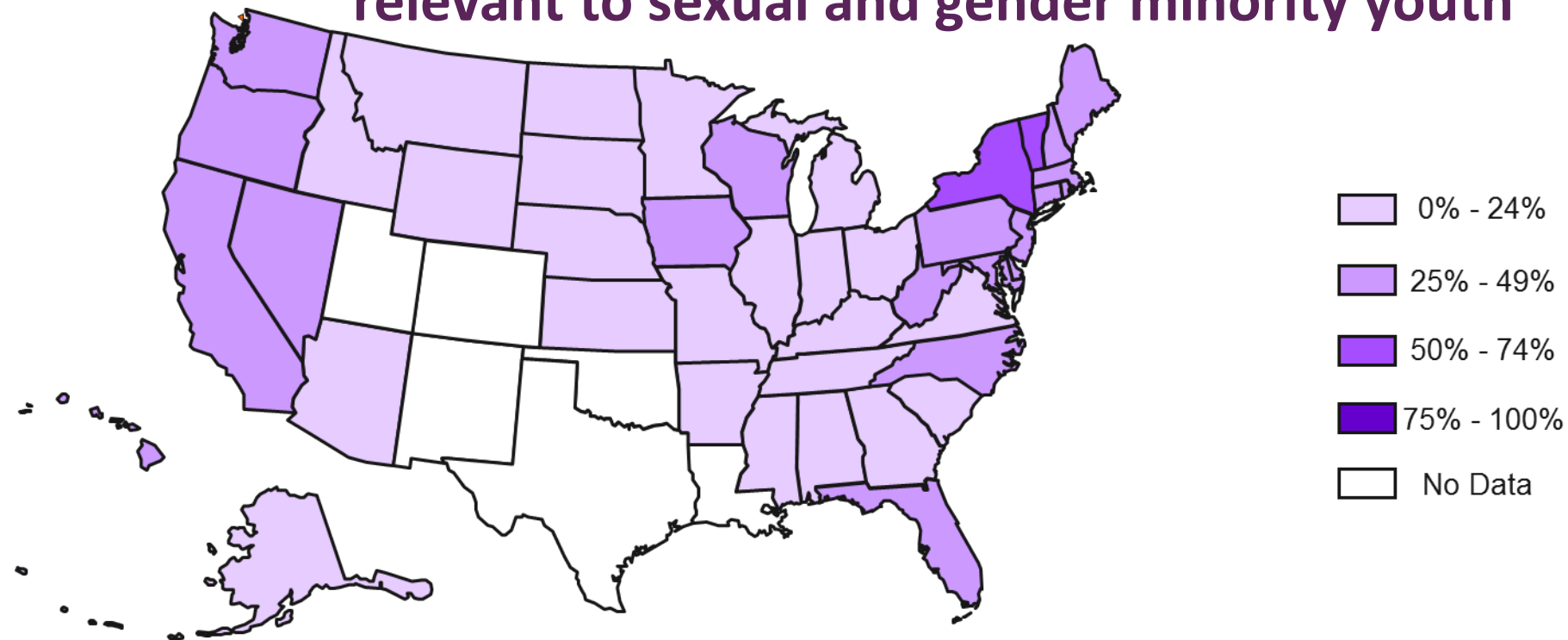
- How to create and sustain healthy and respectful relationships
- The influences of family, peers, media, technology, and other factors on sexual risk behaviors
- Communication and negotiation skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy
- The importance of using condoms consistently and correctly
- The effectiveness of ANY of 7 topics pertaining to a variety of contraceptive methods other than condoms
- The importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy
- How to obtain condoms
- How to correctly use a condom
- Goal-setting and decision-making skills related to eliminating or reducing risk for HIV, other STDs, and pregnancy
- Preventive care (such as screenings and immunizations) that is necessary to maintain reproductive and sexual health
- How to access valid and reliable health information, products, and services related to HIV, other STDs and pregnancy
- The importance of limiting the number of sexual partners.

School Health Profiles, 2014

Note regarding the Percent of Middle and High Schools That Teach Selected HIV, STD, and Pregnancy Prevention Topics

- In future School Health Profiles, middle school health education teachers will also be asked about teaching methods of contraception other than condoms. This topic will be added to the compound indicator calculation starting in 2016.
- In future School Health Profiles, seven questions pertaining to a variety of contraceptive methods will be replaced by a single question regarding the teaching of methods of contraception other than condoms. This variable will replace the current variable constructed by a positive response to ANY of the seven previous questions starting in 2016.
- These two indicators were developed to monitor progress toward the objective. The selected topics provide an indication of how well sexual health education is being implemented, but do not reflect the entirety of content that should be included in K-12 sexual health education. Schools, school districts, parents, and other policy makers should refer to the National Health Education Standards and the Health Education Curriculum Analysis Tool (HECAT) to review the complete recommended content for high quality sexual health education.

Percent of middle and high schools that provide curricula or supplementary materials that include HIV, STD, or pregnancy prevention information that is relevant to sexual and gender minority youth



2014 Median: 24.4%; Range: 11% to 56%

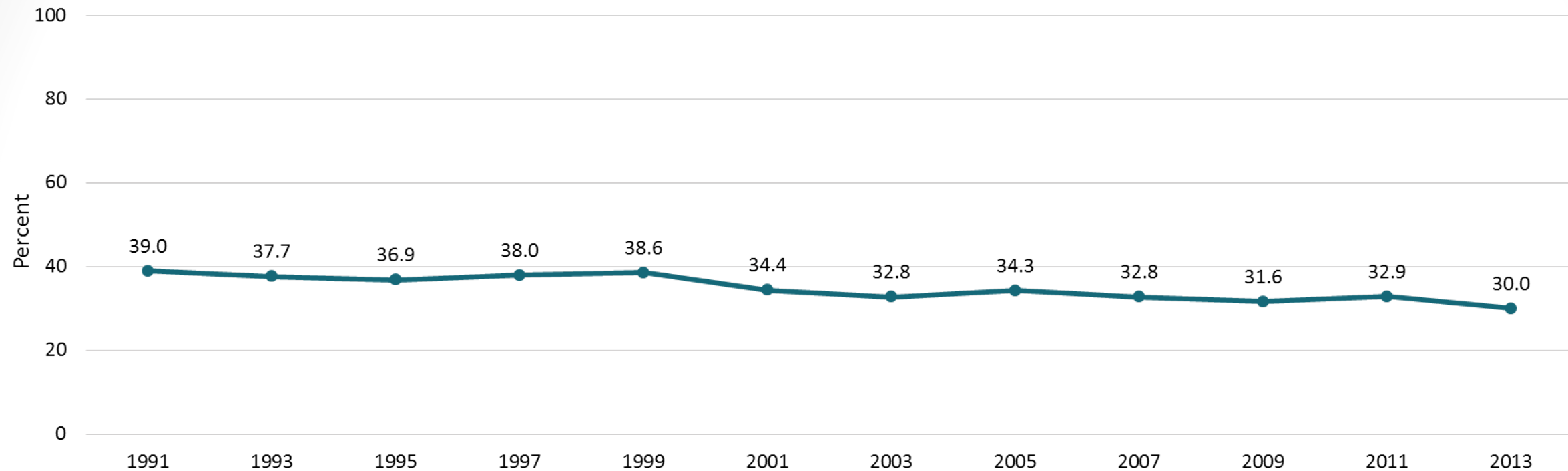
- 0% – 24%: Alabama, Alaska, Arizona, Arkansas, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, South Carolina, South Dakota, Tennessee, Virginia, Wyoming
- 25% – 49%: California, Connecticut, Delaware, Florida, Hawaii, Iowa, Maine, Maryland, Massachusetts, Nevada, New Hampshire, New Jersey, North Carolina, Oregon, Pennsylvania, Rhode Island, Washington, West Virginia, Wisconsin
- 50% – 74%: New York, Vermont
- 75% – 100%: None

No Data

- Did not have weighted results: Colorado, Louisiana, New Mexico, Oklahoma, Texas
- Did not ask question: Utah

2020 Target: 26.8% – this represents a 10% relative increase over baseline

Percent of 9th grade students who ever had sexual intercourse



2013 Prevalence: 30.0%

Based on linear and quadratic trend analyses using logistic regression models controlling for sex and race/ethnicity ($p < 0.05$), the prevalence decreased from 1991 to 2013.

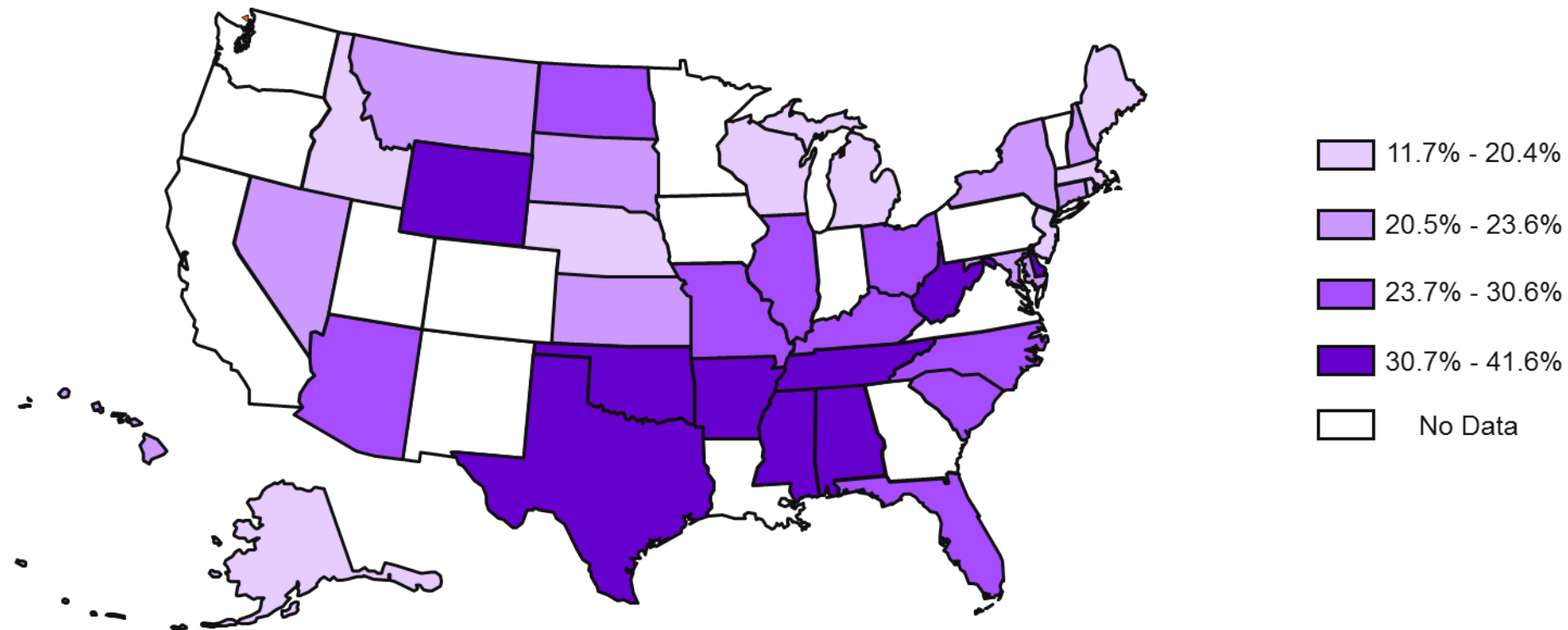
The DASH indicator is “Percent of 9th grade students nationwide who have NEVER had sexual intercourse” (the inverse of the variable). Thus:

2013 Prevalence: 70%

2020 Target: 77% - this represents a 10% relative increase over baseline

National Youth Risk Behavior Surveys, 1991-2013

Percent of 9th grade students who ever had sexual intercourse



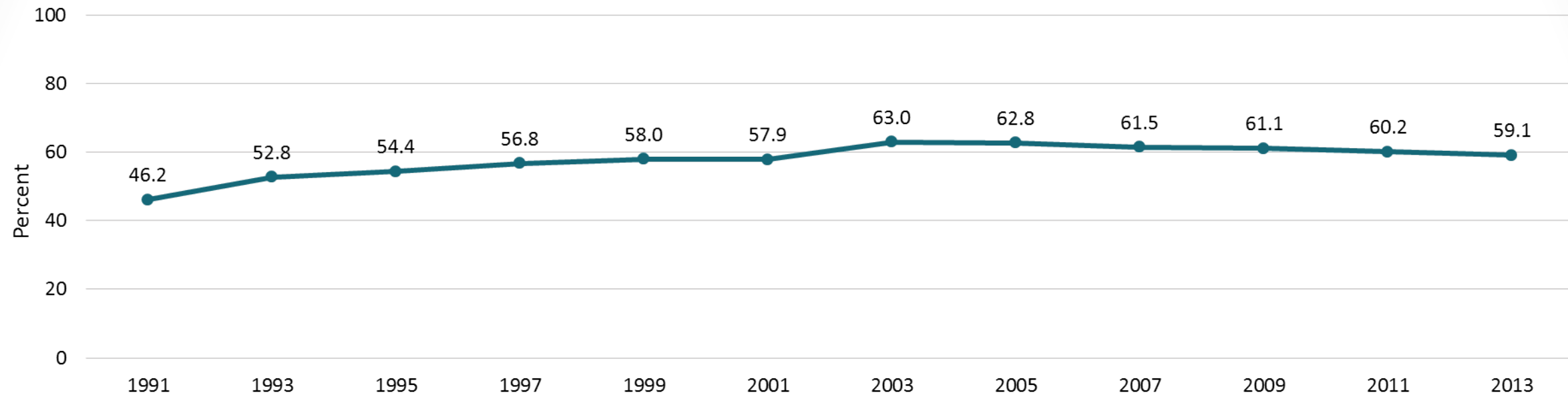
Range: 11.7% to 41.6%

- 11.7% – 20.4%: Alaska, Idaho, Maine, Massachusetts, Michigan, Nebraska, New Jersey, Rhode Island, Wisconsin
- 20.5% – 23.6%: Connecticut, Hawaii, Kansas, Maryland, Montana, Nevada, New Hampshire, New York, South Dakota
- 23.7% – 30.6%: Arizona, Florida, Illinois, Kentucky, Missouri, North Carolina, North Dakota, Ohio, South Carolina
- 30.7% – 41.6%: Alabama, Arkansas, Delaware, Mississippi, Oklahoma, Tennessee, Texas, West Virginia, Wyoming

No Data:

- Did not have weighted results: California, Colorado, Indiana, Iowa, Pennsylvania
- Did not ask question: Vermont, Virginia, Utah, New Mexico, Louisiana, Georgia
- Did not participate: Minnesota, Oregon, Washington

Percent of high school students who used a condom*



*During last sexual intercourse among the 34.0% of students nationwide who were currently sexually active.

2013 prevalence: 59.1%

2020 target: 62.0% – this represents a 5% relative increase over baseline due to the challenge of reversing this long term declining trend.

Based on **linear trend analyses** using logistic regression models controlling for sex, race/ethnicity, and grade ($p < 0.05$):

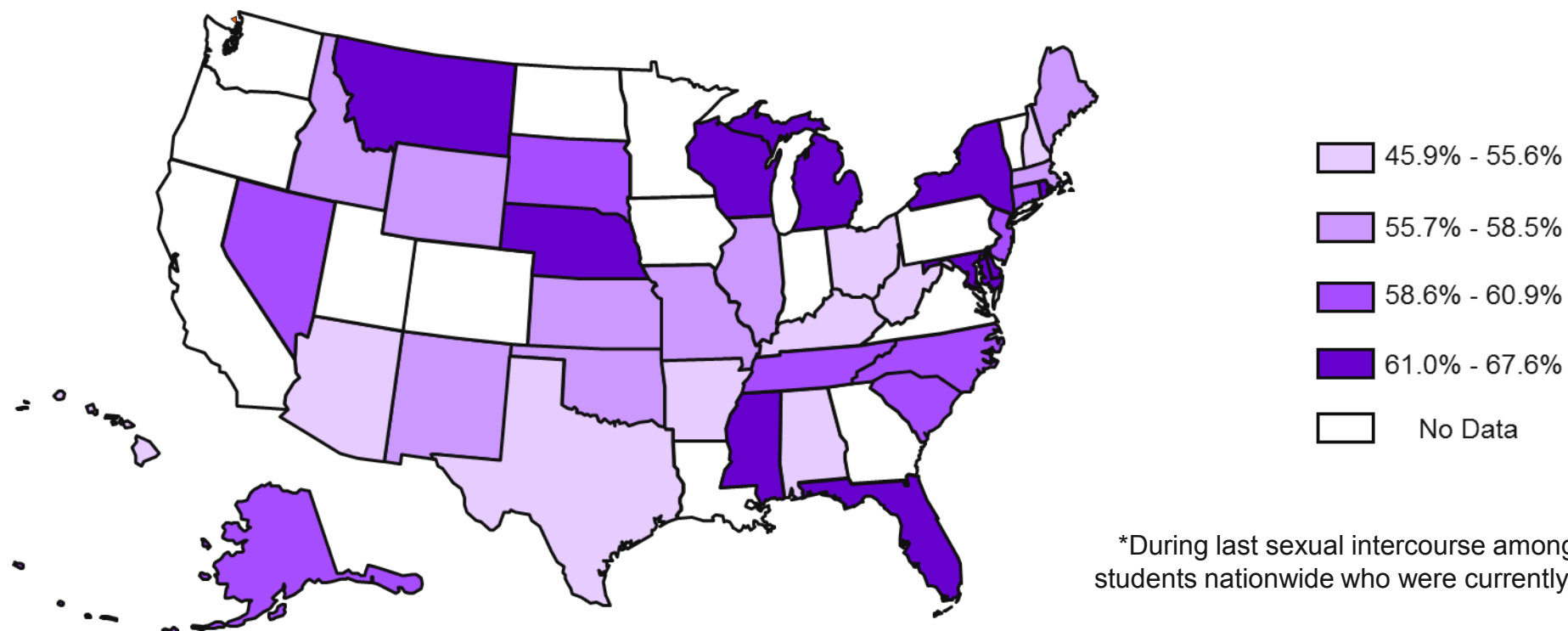
- Prevalence increased overall from 1991 to 2013

Based on **quadratic trend analyses** using logistic regression models controlling for sex, race/ethnicity, and grade ($p < 0.05$):

- Prevalence increased from 1991 to 2003
- Prevalence decreased from 2003 to 2013

National Youth Risk Behavior Surveys, 1991-2013

Percent of high school students who used a condom*



*During last sexual intercourse among the 34.0% of students nationwide who were currently sexually active.

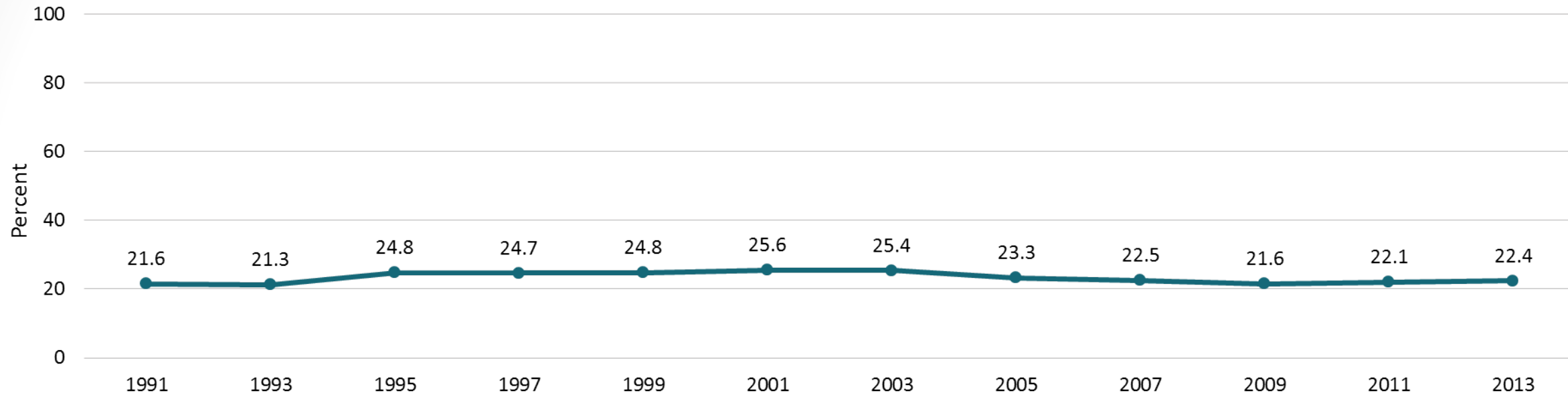
Range: 45.9% to 67.6%

- 45.9% – 55.6%: Alabama, Arizona, Arkansas, Hawaii, Kentucky, New Hampshire, Ohio, Texas, West Virginia
- 55.7% – 58.5%: Idaho, Illinois, Kansas, Maine, Massachusetts, Missouri, New Mexico, Oklahoma, Wyoming
- 58.6% – 60.9%: Alaska, Connecticut, Nevada, New Jersey, North Carolina, South Carolina, South Dakota, Tennessee
- 61.0% – 67.6%: Delaware, Florida, Maryland, Michigan, Mississippi, Montana, Nebraska, New York, Rhode Island, Wisconsin

No Data

- Did not have weighted results: California, Colorado, Indiana, Iowa, Pennsylvania
- Did not ask question: Vermont, Virginia, Utah, North Dakota, Louisiana, Georgia
- Did not participate: Minnesota, Oregon, Washington

Percent of high school students who drank alcohol or used drugs before last sexual intercourse*



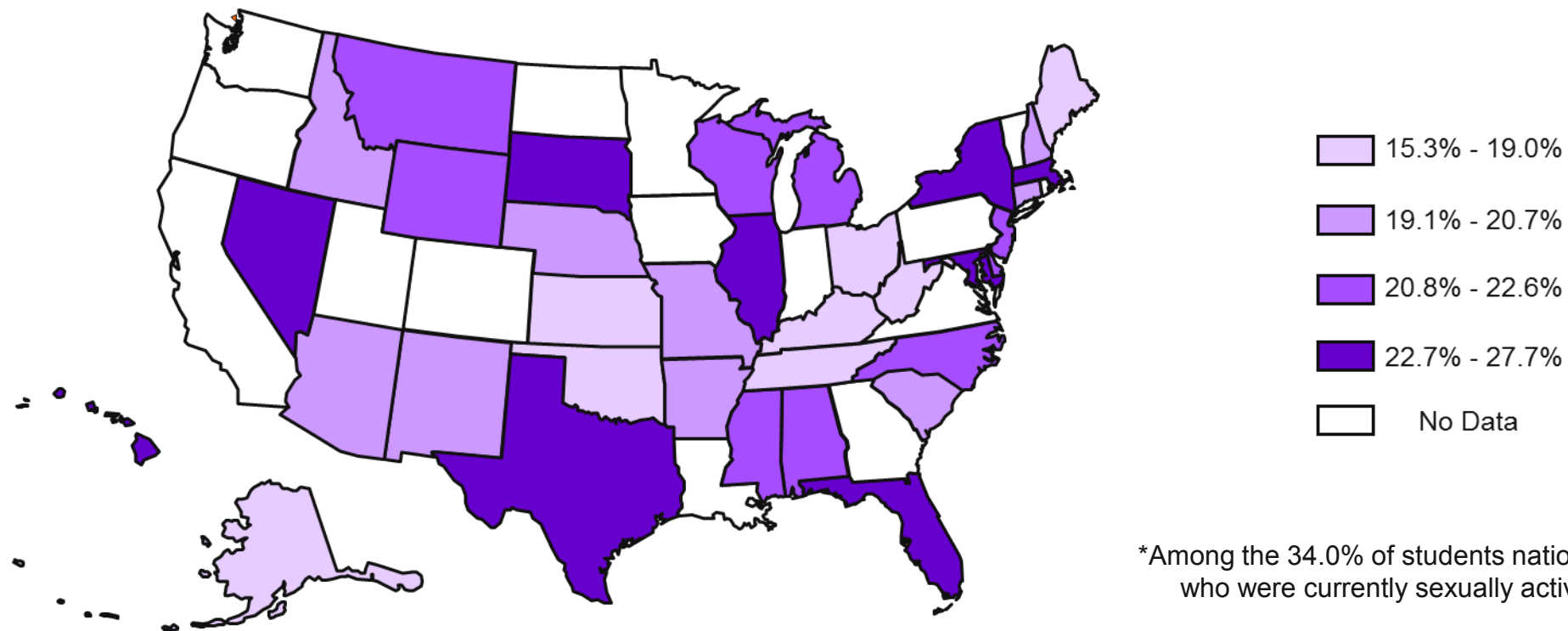
*Among the 34.0% of students nationwide who were currently sexually active.

2013 Prevalence: 22.4%

2020 Target: 20.2% – this represents a 10% relative decrease from baseline.

Based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ($p < 0.05$), the prevalence increased from 1991 to 1999 and decreased from 1999 to 2013.

Percent of high school students who drank alcohol or used drugs before last sexual intercourse*



*Among the 34.0% of students nationwide who were currently sexually active.

Range: 15.3% to 27.7%

- 15.3% – 19.0%: Alaska, Kansas, Kentucky, Maine, Ohio, Oklahoma, Tennessee, West Virginia
- 19.1% – 20.7%: Arizona, Arkansas, Connecticut, Idaho, Missouri, Nebraska, New Hampshire, New Mexico, South Carolina
- 20.8% – 22.6%: Alabama, Delaware, Michigan, Mississippi, Montana, New Jersey, North Carolina, Wisconsin, Wyoming
- 22.7% – 27.7%: Florida, Hawaii, Illinois, Maryland, Massachusetts, Nevada, New York, South Dakota, Texas

No data

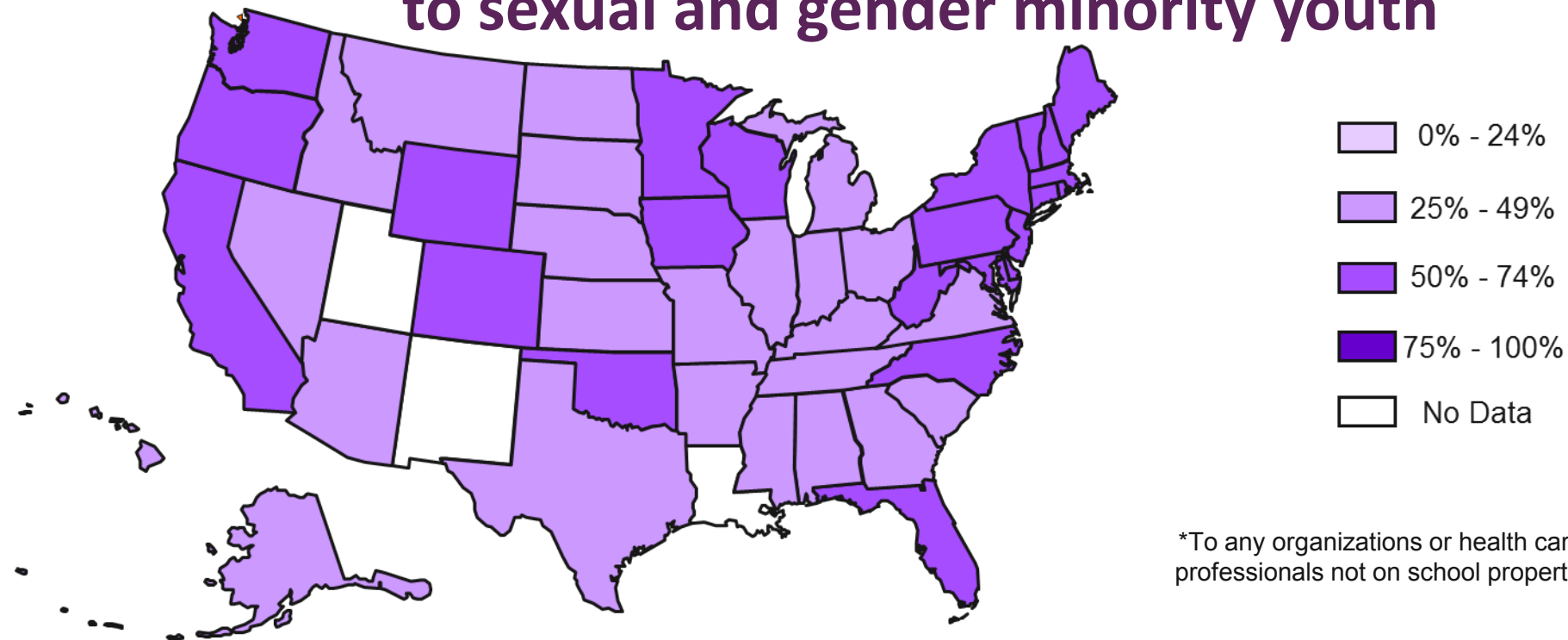
- Did not have weighted results: California, Colorado, Indiana, Iowa, Pennsylvania
- Did not ask question: Vermont, Virginia, Utah, Rhode Island, North Dakota, Louisiana, Georgia
- Did not participate: Minnesota, Oregon, Washington

Strategic Imperative: Address Confidentiality Protections for Teens to Increase Their Use of Sexual Health Services

Objective:

Increase the availability of sexual health services for teens

Percent of middle and high schools that facilitate access to providers* who have experience in providing social and psychological services to sexual and gender minority youth



*To any organizations or health care professionals not on school property.

2014 Median: 46.3%; Range: 30% to 73%

- 0% – 24%: None
- 25% – 49%: Alabama, Alaska, Arizona, Arkansas, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Michigan, Mississippi, Missouri, Montana, Nebraska, Nevada, North Dakota, Ohio, South Carolina, South Dakota, Tennessee, Texas, Virginia
- 50% – 74%: California, Colorado, Connecticut, Delaware, Florida, Iowa, Maine, Maryland, Massachusetts, Minnesota, New Hampshire, New Jersey, New York, North Carolina, Oklahoma, Oregon, Pennsylvania, Rhode Island, Vermont, Washington, West Virginia, Wisconsin, Wyoming
- 75% – 100%: None

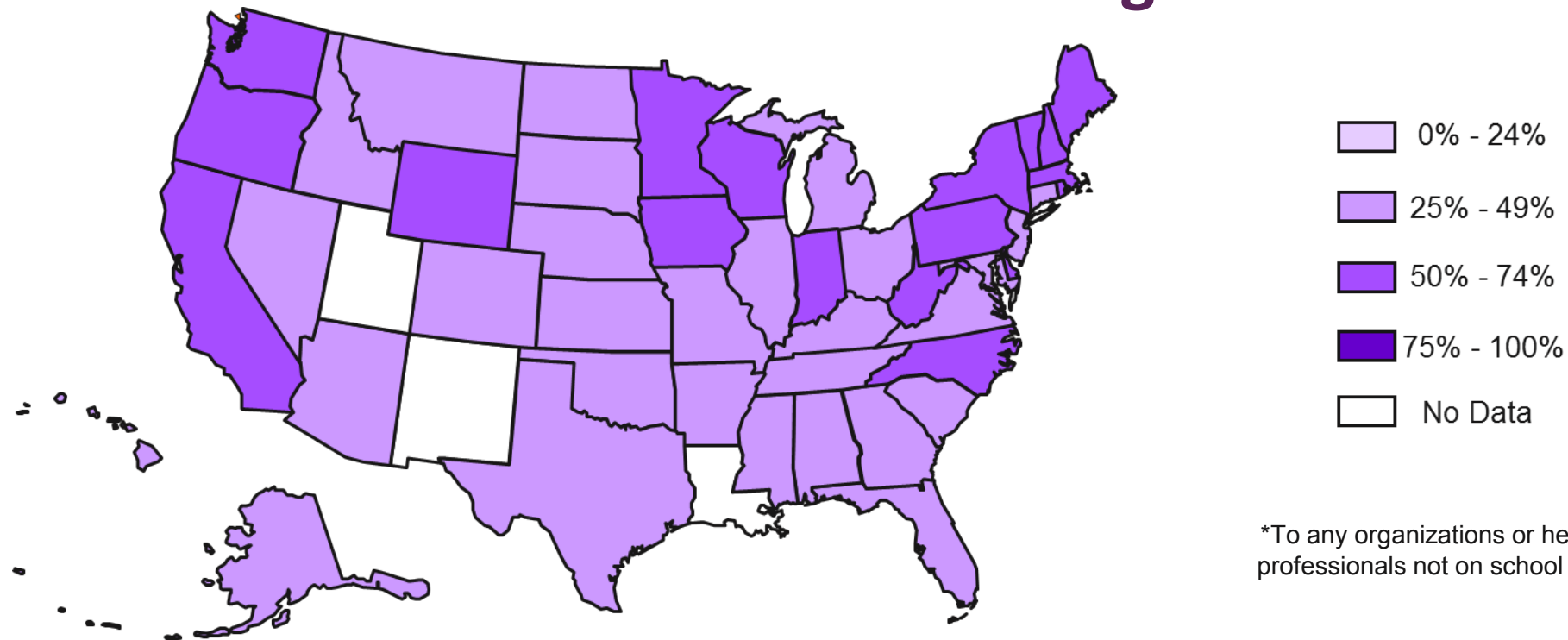
No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask this question: Utah

2020 Target: 50.9% – this represents a 10% relative increase over baseline

School Health Profiles, 2014

Percent of middle and high schools that provide students with referrals* for STD testing



*To any organizations or health care professionals not on school property.

2014 Median: 46.5%; Range: 27% to 69%

- 0% – 24%: None
- 25% – 49%: Alabama, Alaska, Arizona, Arkansas, Colorado, Connecticut, Florida, Georgia, Hawaii, Idaho, Illinois, Kansas, Kentucky, Maryland, Michigan, Mississippi, Missouri, Montana, Nebraska, Nevada, New Jersey, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Virginia
- 50% – 74%: California, Delaware, Indiana, Iowa, Maine, Massachusetts, Minnesota, New Hampshire, New York, North Carolina, Oregon, Pennsylvania, Rhode Island, Vermont, Washington, West Virginia, Wisconsin, Wyoming
- 75% – 100%: None

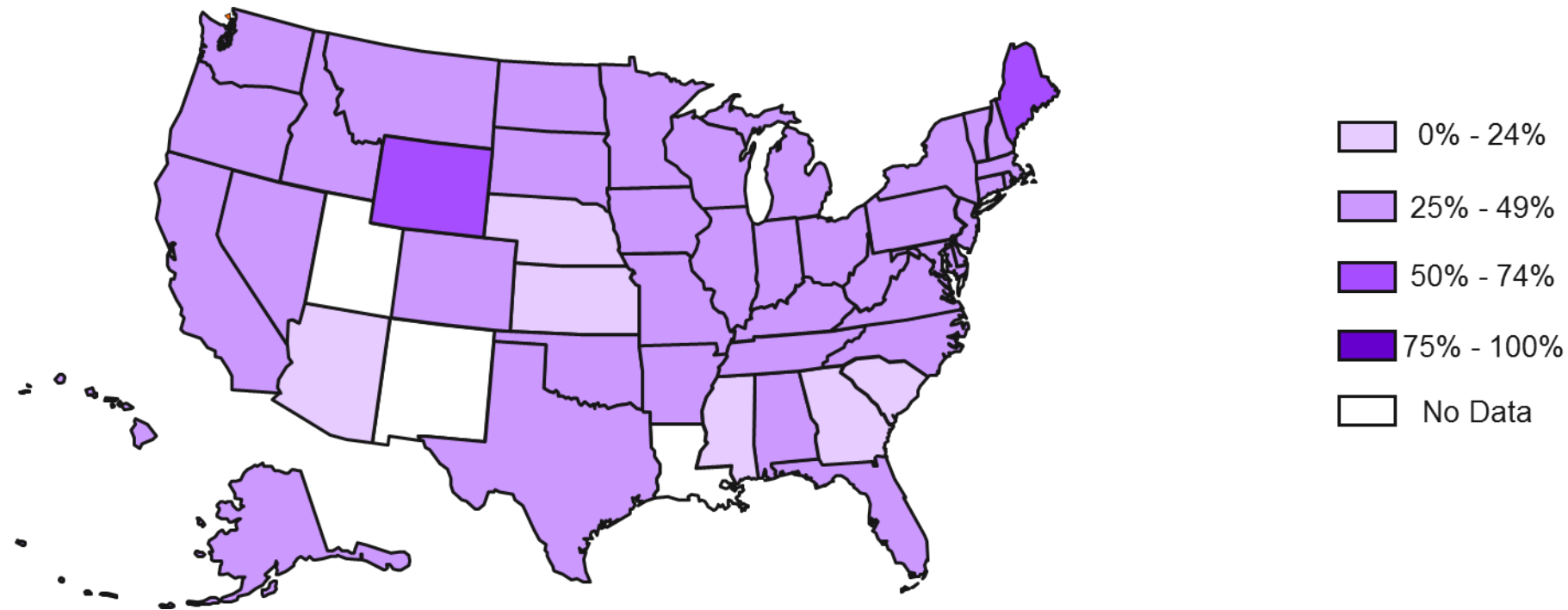
No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask question: Utah

2020 Target: 51.2% – this represents a 10% relative change over baseline

School Health Profiles, 2014

Percent of secondary schools that provide students with on-site services or referrals to healthcare providers for 7 sexual health services



2014 Median: 32.4%; Range: 17% to 52%

- 0% – 24%: Arizona, Georgia, Kansas, Mississippi, Nebraska, South Carolina
- 25% – 49%: Alabama, Alaska, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nevada, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia, Wisconsin
- 50% – 74%: Maine, Wyoming
- 75% – 100%: None

No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask this question: Utah

The 7 sexual health services queried are:

- HIV testing
- STD testing
- Pregnancy testing
- Provision of condoms
- Provision of condom-compatible lubricants
- Provision of contraceptives other than condoms
- HPV vaccine administration

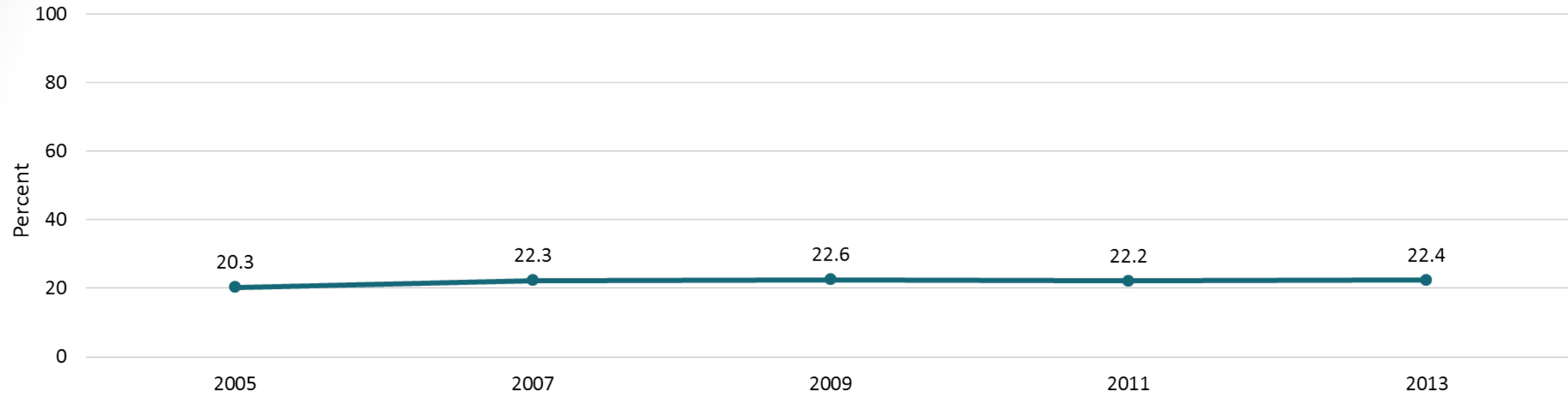
2020 Target: 35.6% – this represents a 10% relative change over baseline

School Health Profiles, 2014

Percent of middle and high schools that provide referrals for sexual/reproductive health services for which parental consent or notification is not required

- New variable on School Health Profiles starting in 2016
- Response options:
 - a. This school does not provide any sexual or reproductive health services.
 - b. Parental consent is required before any sexual or reproductive health services are provided.
 - c. Parental consent is not required for sexual or reproductive health services and parents are provided with information about services provided only upon request.
 - d. Parental consent is not required for sexual or reproductive health services, but parents may be notified depending on the service provided.
 - e. Parental consent is not required for sexual or reproductive health services, but parents are notified about all services provided.
 - f. Parental consent is not required for sexual or reproductive health services and parents are not notified about any services provided.
- Indicator examines prevalence of response option “f”

Percent of High School Students Who Were Ever Tested for HIV*



*Not including tests done when donating blood, among students who ever had sexual intercourse.

These are results from the National Youth Risk Behavior Surveys, 2005-2013. This slide shows percentages from 2005 through 2013 for high school students who were ever tested for HIV (not including tests done when donating blood, among students who ever had sexual intercourse).

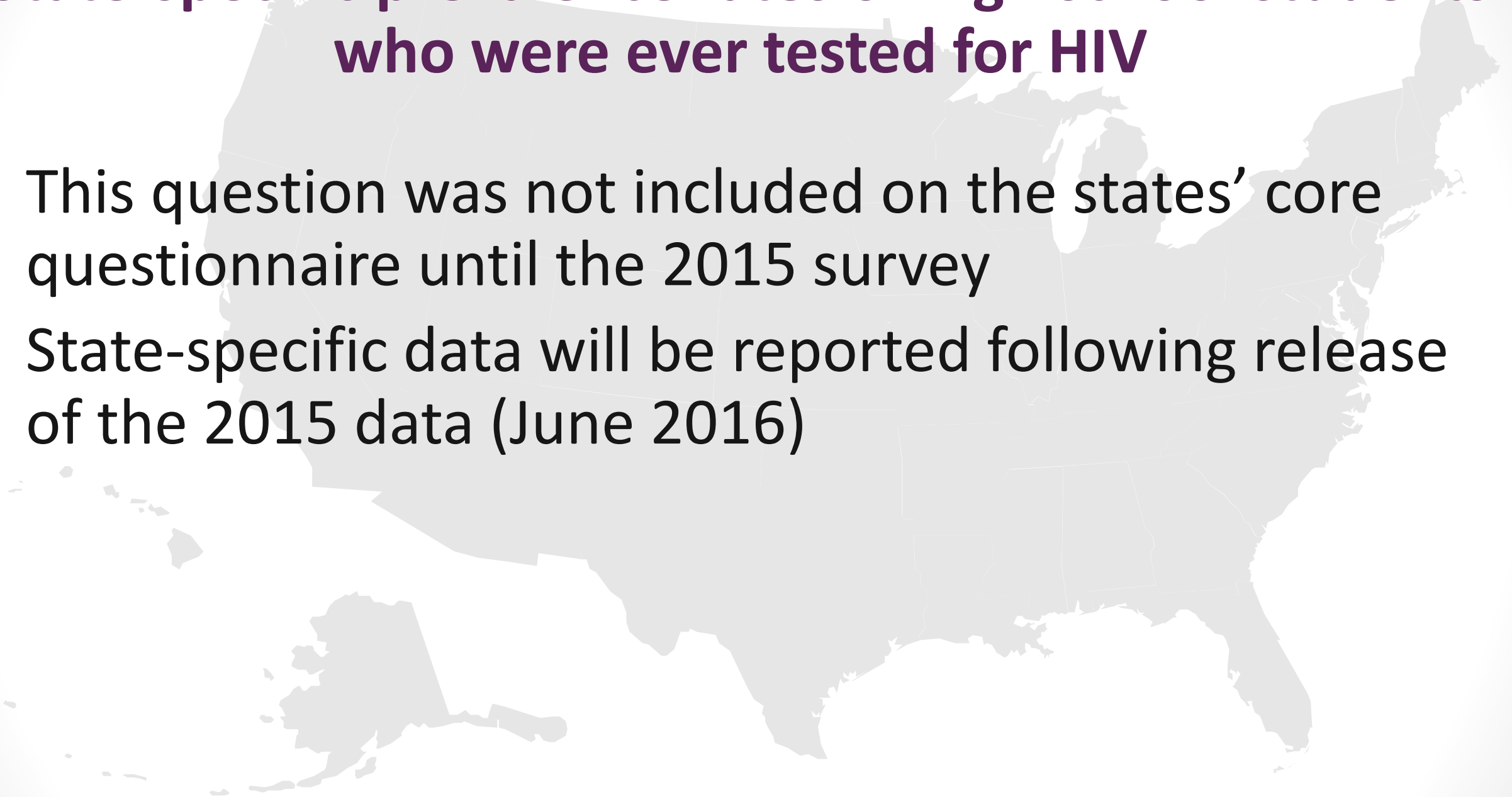
The percentage for 2005 is 20.3. The percentage for 2007 is 22.3. The percentage for 2009 is 22.6. The percentage for 2011 is 22.2. The percentage for 2013 is 22.4.

For this behavior, based on linear and quadratic trend analyses using logistic regression models controlling for sex, race/ethnicity, and grade ($p < 0.05$), there was no change 2005-2013.

National Youth Risk Behavior Surveys, 2005-2013

State-specific prevalence rates of high school students who were ever tested for HIV

- This question was not included on the states' core questionnaire until the 2015 survey
- State-specific data will be reported following release of the 2015 data (June 2016)

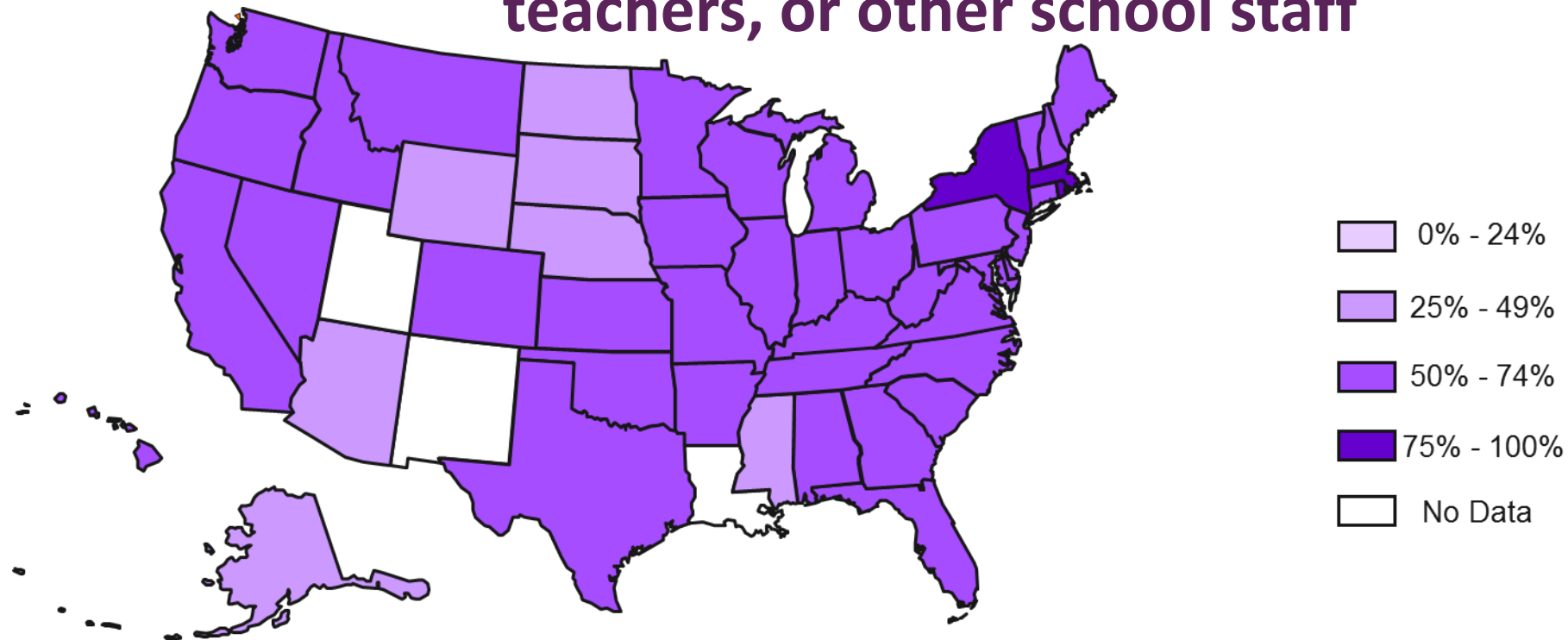


Strategic Imperative: Expand the Evidence Base regarding Sexual and Gender Minority Teen Health

Objective:

Increase the proportion of schools that are addressing the unique needs of sexual and gender minority teens

Percent of middle and high schools that identify “safe spaces” where sexual and gender minority youth can receive support from administrators, teachers, or other school staff



2014 Median: 61.4%; Range: 37% to 85%

- 0% – 24%: None
- 25% – 49%: Alaska, Arizona, Mississippi, Nebraska, North Dakota, South Dakota, Wyoming
- 50% – 74%: Alabama, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Maryland, Michigan, Minnesota, Missouri, Montana, Nevada, New Hampshire, New Jersey, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia, Wisconsin
- 75% – 100%: Massachusetts, New York, Rhode Island

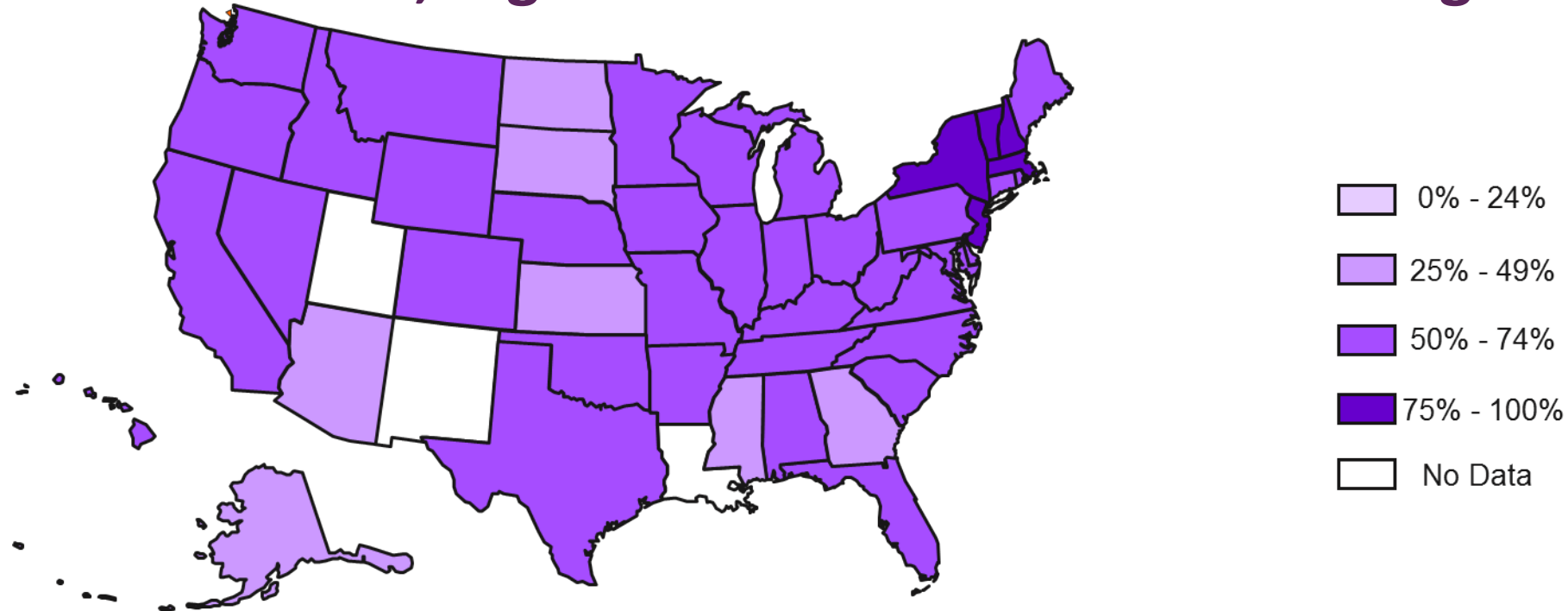
No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask question: Utah

2020 Target: This is an educational best practice, but current evidence to support this as an intervention is lacking, thus no targets are set until the evidence base is strengthened.

School Health Profiles, 2014

Percent of middle and high schools that encourage staff to attend professional development on safe and supportive school environments for all students, regardless of sexual orientation or gender identity



2014 Median: 59.0%; Range: 39% to 82%

- 0% – 24%: None
- 25% – 49%: Alaska, Arizona, Georgia, Kansas, Mississippi, North Dakota, South Dakota
- 50% – 74%: Alabama, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Virginia, Washington, West Virginia, Wisconsin, Wyoming
- 75% – 100%: Massachusetts, New Hampshire, New Jersey, New York, Vermont

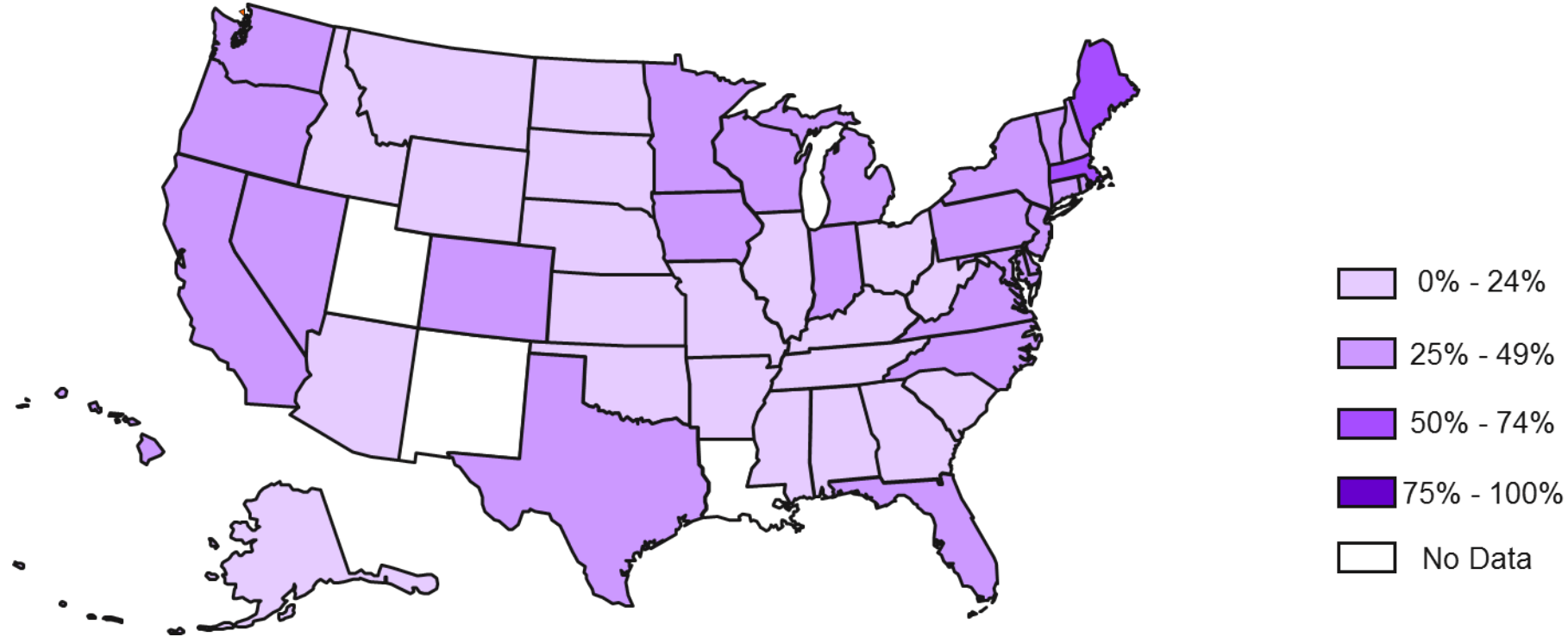
No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask question: Utah

2020 Target: This is an educational best practice, but current evidence to support this as an intervention is lacking, thus no targets are set until the evidence base is strengthened.

School Health Profiles, 2014

Percent of middle and high schools with a gay/straight alliance or similar club



2013 Median: 26.7%; Range: 13% to 56%

- 0% – 24%: Alabama, Alaska, Arizona, Arkansas, Georgia, Idaho, Illinois, Kansas, Kentucky, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, Oklahoma, South Carolina, South Dakota, Tennessee, West Virginia, Wyoming
- 25% – 49%: California, Colorado, Connecticut, Delaware, Florida, Hawaii, Indiana, Iowa, Maryland, Michigan, Minnesota, Nevada, New Hampshire, New Jersey, New York, North Carolina, Oregon, Pennsylvania, Rhode Island, Texas, Vermont, Virginia, Washington, Wisconsin
- 50% – 74%: Maine, Massachusetts
- 75% – 100%: None

No Data

- Did not have weighted results: Louisiana, New Mexico
- Did not ask question: Utah

2020 Target: This is an educational best practice, but current evidence to support this as an intervention is lacking, thus no targets are set until the evidence base is strengthened.

School Health Profiles, 2014

Percent of sexual minority male high school students in major urban centers who had one or more of three HIV risk behaviors

Overall, 34.1% of sexual minority male high school students had one or more of these risk factors

- Numerator: Number of male students in grades 9-12 from 15 large urban school districts who had sexual contact with only males or with both males & females and who
 - ❑ Had sexual intercourse during the past three months with three or more persons, OR
 - ❑ Had sexual intercourse during the past three months and did not use a condom during last sexual intercourse, OR
 - ❑ Ever injected any illegal drug
- Denominator: Number of male students in grades 9-12 from 15 large urban school districts who had sexual contact with only males or with both males and females

2013 Prevalence: 34.1%

2020 Target: 30.7%

The 15 large urban school districts included in the calculation of the indicator are: Baltimore, Boston, Chicago, Detroit, DC including Charter Schools, Fort Lauderdale/Broward County, Houston, Los Angeles, Memphis, New York City, Orange County, Palm Beach, Philadelphia, San Diego, San Francisco.

The individual indicators that make up the overall indicator are calculated among male students who have had sexual contact only with males or with both males and females:

- 52.9% of students who had sex during the 3 months before the survey did not use a condom at last sexual encounter (i.e., 16% of sexual minority male students had sex in the past 3 months; 52.9% of these students did not use a condom at last sexual intercourse)
- 16.0% had 3 or more sexual partners during the 3 months before the survey
- 18.0% ever injected any illegal drug

Large Urban Area Youth Risk Behavior Surveys, 2013

Strategic Imperative: Integrate Substance Use Prevention into HIV/STD Prevention Efforts for Teens

Objective:

Increase the availability of tools that incorporate substance use prevention efforts

Administrative Indicators

Under Development

- Increase the number of School Health Profiles questions that address the intersection of sexual risk taking and substance use by teens
- Increase the number of YRBS and Profiles analyses that address the intersection of sexual risk taking and substance use by teens
- Increase the number of program sites that are addressing the intersection of sexual risk taking and substance use by teens

Resources

- School Health Profiles
- National Youth Risk Behavior Survey
- CDC's Division of Adolescent and School Health Web site



Healthy Teens. Successful Futures.

Maximizing Opportunities for Primary Prevention of HIV and STDs

For more information:
1-800-CDC-INFO (232-4636)
www.cdc.gov

National Center for HIV, Viral Hepatitis, STD, and TB Prevention
Division of Adolescent and School Health

